Nova Scotia
Advisory Council
on the Status of
Women

Conseil consultatif
sur la condition
féminine en
Nouvelle-Écosse

An agency of the
Province of Nova Scotia

SETTING NOVA SCOTIA'S PRIORITIES

A SUBMISSION TO
THE HONOURABLE GREG KERR
MINISTER OF FINANCE

FEBRUARY 18, 1992

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Introduction

The Nova Scotia Advisory Council on the Status of Women strives to promote the social, political and economic equality of all women in this province. We welcome the opportunity to present our views on priorities for the government in this time of difficult financial decision-making. Our focus is on social and economic issues which have particular impact on women.

Nova Scotia, like the rest of Canada, is in the midst of an economic crisis. Growth in revenues is not keeping pace with increases in the demand for and costs of our social programs. However, at this juncture we must be very careful not to make policy decisions that would impair or jeopardize the existence of these essential programs.

While economic restraint is affecting all sectors of our society, women and children are invariably hardest hit by poverty. Nearly 60 percent of Canadian adults living in poverty are women; roughly half of these women are working, full- or part-time. While many elderly persons are hard-hit by poverty, the poverty rate of elderly women is double that of men. However, the most "poverty-prone" group is single mothers; across the country 57 to 75 percent of single-parent families headed by women live below the poverty line – the amount Statistics Canada deems necessary to meet basic needs. In Nova Scotia, 65 percent of children living with a single mother fall below the poverty line.[1]

In 1990, the National Council of Welfare concluded that "women are still extremely vulnerable to poverty for reasons almost totally beyond their control."[2] The main causes of women's poverty include child care responsibilities, job segregation, discrimination,

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[1] Sources: Women and Poverty Revisited (National Council of Welfare, Summer 1990); What Comes First? A Report of the Payment of Support Orders in New Brunswick (New Brunswick Advisory Council on the Status of Women, August 1990); Women and Labour Market Poverty (Canadian Advisory Council on the Status of Women, June 1990); "Support for Women, Children Should Be Top Priority," Chronicle-Herald, June 13, 1990; Barbara Blouin, Women and Children Last: Single Mothers on Welfare in Nova Scotia (Institute for the Study of Women, Halifax, 1989).

[2] *Ibid*, National Council of Welfare, p. 2.

lower wages and unstable employment. Quite simply, large numbers of women are guaranteed to live in poverty at some time in their lives.

Commitment to caring for the most vulnerable members of our society is a fundamental part of the social fabric of Nova Scotia and of Canada. The current provincial government claims a continued commitment to its responsibilities toward those who cannot provide for themselves.[3] Though these are difficult economic times, any move toward greater economic efficiency must be accompanied by firm social protection.

Education

The Advisory Council submits that a more streamlined approach to the administration of the province's schools and school boards would not only provide greater uniformity in the quality of education, but would also be a cost-saving measure. Similarly, greater cooperation among Nova Scotia universities, with resultant decreases in program duplication and administrative costs, would appear to be a step toward levelling discrepancies in educational quality while at the same time allowing overall financial savings. However, it is essential that efforts toward amalgamation of universities not result in greater centralization. Centralization of post-secondary resources would seriously decrease accessibility.

For women, access is a major concern in the area of post-secondary education. Women already face significant inequities in access to educational opportunities and, subsequently, to employment opportunities. Any moves toward consolidation of post-secondary educational services must be accompanied by improvements in the provision of alternate methods of delivery of educational services, such as distance education. Furthermore, the federal student loan and provincial student bursary programs must make it financially possible for students to obtain post-secondary education. At a minimum, students must be able to work part-time without economic penalty.

Health Care

The 1988 Nova Scotia Royal Commission on Health Care made several recommendations aimed at increasing the cost-effectiveness of providing health care

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[3] Budget Address, Honourable Greg Kerr, May 14, 1991, p. 10.

services. The report of the Royal Commission provides a comprehensive design for the development of an innovative new strategy in health care for this province. This proposal calls for, among other things, striking a better balance between the curative and preventive aspects of health care. A shift away from the traditional orientation to institutional curative care toward a model of community-based preventive health care is seen as a step toward more appropriate and efficient use of health services. This would be accompanied by a public education campaign to increase consumer awareness of over-use and appropriate use of health care resources.[4]

The Advisory Council fully endorses the aims of this strategy for the provision of health care services. We note, however, that the report of the Royal Commission was released in December 1989, and as yet, Nova Scotians have seen few steps toward the full implementation of this plan. We urge the government to accelerate the implementation of the recommendations of the Royal Commission, which, as an overall design for a health care system, would not only be more cost-effective, but also better meet the needs of health care consumers.

Sexuality Education and Family Planning

In line with the Advisory Council's emphasis on the priority of prevention in health care, there are other areas in which we believe initial expenditures for prevention can provide substantial long-term cost savings. One of these is sexuality education and family planning services. We submit that the costs to the state of inadequate provision of family planning services far outweigh the costs of establishing programs and services needed to prevent sexually transmitted diseases (STDs) and unintended pregnancies.[5]

The number of teenagers in Nova Scotia who are sexually active is increasing. The rate of teen pregnancy, which had been declining, is now steadily climbing (see Appendix A). Levels of STDs are also rising. In light of these facts, it is imperative that

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[4] The Report of the Nova Scotia Royal Commission on Health Care: Toward a New Strategy, December 1989.

[5] For further information about the Advisory Council's position on these issues, see Report on the Status of Family Planning and Sexuality Education in Nova Scotia, January 1990.

the government of Nova Scotia implement preventive measures to protect teens and adults from unwanted pregnancies and STDs.

Planned Parenthood Nova Scotia and its five regional affiliate offices provide information and resource services concerning family planning methods and sexually transmitted diseases. Metro Area Family Planning in Halifax is the only office equipped and funded to provide clinic service including contraceptive prescriptions or fittings, pregnancy tests, and STD diagnosis and treatment.

There is a great demand for this service in the metro area. The vast majority (87 percent) of the clinic users reside in Halifax or Dartmouth; 60 percent of the clinic users are high school and university students.[6] This raises concerns about students at universities, community colleges, and vocational schools in other areas of the province who do not have access to such services.

In general, access to family planning programs and sexuality education is severely constrained in this province. Only 33 percent of Atlantic Canadians are satisfied with the level of family planning services.[7] The majority of counties in the province have limited or no family planning programs and/or services (see Figure 1). The geographic access problem may be compounded by financial and educational barriers.[8]

What does the lack of adequate family planning actually cost the Province of Nova Scotia? Table 1 has been modified from a 1984 study prepared by Planned Parenthood Nova Scotia.[9] Using only the costs of teenage pregnancies,[10] out-of-date prices, and

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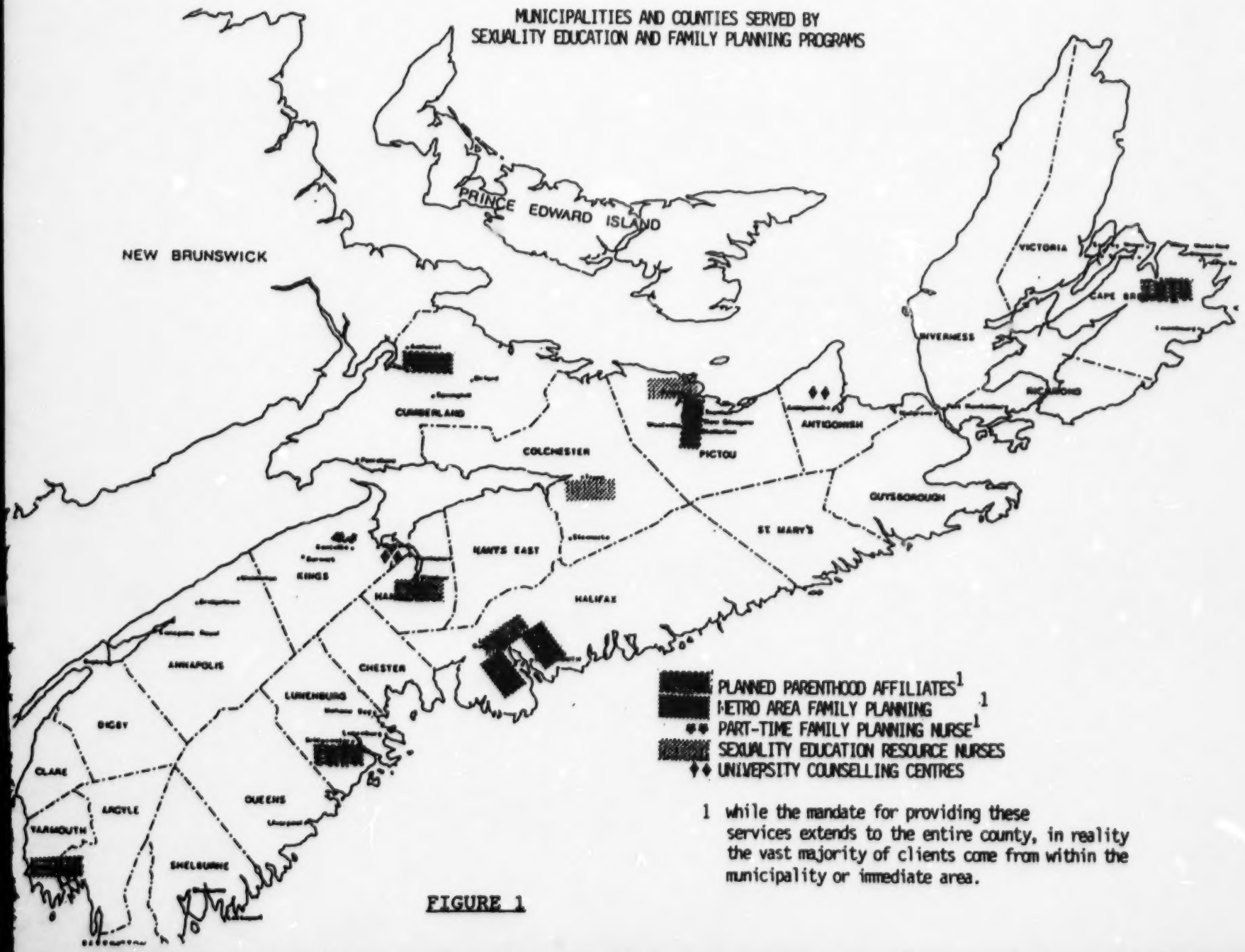
[6] Correspondence and materials, Metro Area Family Planning.

[7] "Gallup Poll reveals attitudes toward sexuality", p. 25-27.

[8] The Advisory Council's field worker on the Eastern Shore reported that area women can "obtain birth control pills at Planned Parenthood at a reduced cost if they can get to Planned Parenthood in Metro. Transportation remains a problem for disadvantaged adults and for students. Information is available if you know what information you want and who to go for it. If you don't, then libraries full of it are of no consequence." (Robinson, NSACSW field worker's report, p. 3. Emphasis in the original.)

[9] Planned Parenthood Nova Scotia.

[10] Only teen pregnancies have been included in the table rather than the costs of all pregnancies to unmarried mothers. To assume that all unmarried mothers are the victims of accidental pregnancies, and that all married mothers plan their children, does a gross disservice to both single and partnered adult women and hides the realities of some



1 while the mandate for providing these services extends to the entire county, in reality the vast majority of clients come from within the municipality or immediate area.

FIGURE 1

a teen birth rate lower than the current rate, the lack of family planning services was still shown to incur substantial costs to the province.

TABLE 1

Monetary Costs Related to Lack of Family Planning Services Nova Scotia, 1983-84[11]

Therapeutic abortions performed in Nova Scotia	$ 621,551
Live births to teenage mothers	4,029,281
Family Benefits to teenage mothers	748,800
Foster/temporary care to children of unmarried mothers[12]	818,806
Public Health postnatal visits to 1,299 teenage mothers	135,096
TOTAL	$6,353,534

single and lesbian women who choose to have children and of the many married women who experience unplanned pregnancies. However, it is probably safe to assume that the vast majority of teen women who get pregnant did not intend to do so when they engaged in sexual activity.

[11] Costs that are not incorporated into this table include social services related to unplanned pregnancies (e.g., caseworker salaries), daycare programs in high schools, Bethany Home operating costs, Home of the Guardian Angel operating costs, indirect health service costs (e.g., home visits), as well as many other "hidden" costs, such as those absorbed by the families of financially-dependent pregnant teens. Also, since it cannot be assumed that all unmarried women are unwilling mothers, and vice versa, the costs that are included in this table represent a minimum expenditure and are in most cases greatly underestimated. It has been suggested that as many as half of all conceptions, including those occurring within marriage, are unplanned. See for example, Day 1988, Genevie and Margolies 1987, and Ory 1978, among others.

[12] Expenditures for "teenage mothers" and "unmarried mothers" could not be separated in this category.

The evaluators of an adolescent pregnancy prevention program in Ontario calculated a $25 million savings to the Ontario government from reductions in the rates of abortions and pregnancies among teenaged women, as well as social assistance to teenaged mothers.[13] The Planned Parenthood Federation of Canada estimates that each dollar spent on the prevention of adolescent pregnancy can save more than $6 in future medical and social service expenditures.[14]

The costs of treating sexually transmitted diseases and pelvic inflammatory disease are also significant. In Canada, hospital admissions for pelvic inflammatory disease (PID) have more than doubled during the past 15 years.[15] And in 1981-82, $132 million was spent in the direct and indirect costs of managing PID and ectopic pregnancy in Canada;[16] treatment of PID in Nova Scotia costs the province $24 million in 1983-84. The management of STDs is a clear indication of the lack of emphasis being placed on prevention by our health care system. The incidence of and complications arising from STDs could be greatly reduced through effective education about the diseases and their modes of transmission. Of course, this education must be coupled with availability of the necessary resources to put the preventive principles into practice.

The Advisory Council believes that the implementation of comprehensive family planning services and the development of – and access to – safe, effective and accessible contraception will reduce the need for abortion services, reduce health care costs and decrease the incidence of sexually transmitted diseases. We urge the government to consider carefully the monetary, health, and psychological costs of failing to provide preventative sexuality information to the people of Nova Scotia.

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[13] Orton and Rosenblatt, Adolescent Pregnancy in Ontario, p. 8.

[14] Planned Parenthood Federation of Canada Request for Funds, 1982-83, Submitted to the Federal Department of Health and Welfare.

[15] Health and Welfare Canada, Reproductive Health Activities and Concerns: Report of the Departmental Task Force on Reproductive Health, 1983, p. 71

[16] Calgary Health Services, Report of the National Consultation on Research Needs in Sexuality and Reproductive Health: A Public Health Perspective, p. 22

Child Care

Accessible, affordable child care is essential to women's social and economic equality. More and more women are entering the paid labour force. Today the majority of women with preschool-age children work outside the home. In most cases, either they are the sole earners in their families, or two incomes are necessary to provide for the needs of the family.[17]

The current freeze on provincial spending for child care is an example of governmental cost-cutting which will have direct impact on the most economically vulnerable members of our society – women, single parents and low-income families.

The Advisory Council submits that government subsidization of child care for parents who demonstrate need is cost-effective, both in the short term, and in the long term. In the short term, the cost to the government of child care and partial social assistance is less than full social assistance to the family would be. In the long term, making it possible for single mothers and low-income parents to work in paid employment is one step toward decreasing dependence on social assistance programs.

Without subsidization of child care for parents in need, there is a disincentive for parents to find employment, and an incentive for them to remain on Family Benefits. For many men and women on social assistance, the only jobs available lack career advancement opportunities, and do not even pay a living wage. For women – who earn about 67 cents for every dollar a man earns, who are segregated in low-paying, traditional "women's work," and who make up the majority of the involuntary, part-time labour force – the situation is even worse. They simply cannot afford to work outside the home. By the time they pay for child care and transportation to a minimum wage job, they have less money left than they would have on social assistance.[18]

A key factor in reducing the demand for income support programs lies in making it possible for parents on social assistance to participate in the paid labour force. This

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[17] Statistics Canada, Estimates of Family Composition, by Labour Force Characteristics (June 1990). Even if this were not the case, women should be as free to work outside the home as men are, without having to justify their decisions.

[18] Barbara Blouin, *op. cit.*, p. 34. See also Background Paper: Women and Part-Time Work in Nova Scotia (Nova Scotia Advisory Council on the Status of Women, September 1989).

is one essential component in the creation of a strong and vibrant economy – an economy in which women share equal opportunities.

The failure to ensure access to affordable child care might appear on the surface to improve the financial situation by reducing provincial expenditures. But it would also make it less possible for many parents – in all likelihood, mothers – to work outside the home. Any economic recovery based on such grounds would be a recovery in appearance only, and of benefit to men only. It would be built upon the invisible and unpaid work of women.

The province's economic recovery cannot be dependent upon the hidden costs of women's unpaid labour in the home – in performing housework and caring for children, partners and elderly kin. Services must be in place that allow women to take advantage of employment opportunities in the paid labour force, if they choose to, while other individuals are remunerated fairly for caring for the children of the province.

The Advisory Council recommends an increase in the number of subsidized child care spaces in Nova Scotia. This echoes one of the many recommendations made by the Round Table on Day Care in Nova Scotia which have not, to date, been implemented. The Round Table's report emphasized that the creation of subsidized spaces should receive highest priority. The report concluded that "a well-funded day care system is a support to the economic and social well-being of the province. As day care becomes more accessible, more parents are able to lead financially productive lives. Day care becomes affordable to low and middle income families, often replacing the need for social assistance."[19]

Social Assistance

We reiterate that in order to create a strong and vibrant economy, the Province of Nova Scotia must make it possible for women to reduce their dependence on the state by taking advantage of employment and training opportunities. The provincial Family Benefits Program's "work incentive" of $200 (gross income) is insufficient to make it worthwhile for recipients to find paid employment. Single mothers are not allowed to deduct child care or other work-related expenses from their gross earnings; these

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[19] Report of the Round Table on Day Care in Nova Scotia, April 25, 1991, p.30.

considerable expenses (especially if subsidized child care is unavailable) effectively cancel out any real incentive to work.[20]

Any incentives available to Family Benefits recipients who obtain full-time work must also be extended to those who obtain part-time work. Such provisions would directly affect women, as women make up the majority (71 percent in 1987) of the part-time work force.[21]

Maintenance Enforcement

One of the causes for the poverty of sole-support parents is the failure of absent parents to participate in the costs of child rearing. Approximately 80-85 percent of lone parent families are headed by women.[22] In most cases, mothers living apart from their ex-husbands or male partners have some form of maintenance (money paid by absent parents for child support), either through the Family Court or through a federal divorce order. Across Canada, the default rate on maintenance orders is 85 percent.[23] In Nova Scotia, in 1989-90, the number of Family Court maintenance order violations was well over a third of the total number of active court orders[24] (see Appendix B).

Maintenance enforcement mechanisms are cumbersome and ineffective. Even when maintenance orders are arranged through Family Court, in which case the Court is responsible for collecting defaulted payments, the onus still lies on the recipient to initiate enforcement procedures. This may involve calling Family Court, signing affidavits

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[20] Department of Community Services, Family Benefits Program; Barbara Blouin, *op. cit.*, p. 34.

[21] Nova Scotia Advisory Council on the Status of Women, op cit., Women and Part-Time Work in Nova Scotia, 1989.

[22] New Brunswick Advisory Council on the Status of Women, *op. cit.*, p. 2 ; Canadian Advisory Council on the Status of Women, The Benefits and Cost-Effectiveness of a Central Registry of Maintenance and Custody Orders, March 1985, p. 11.

[23] *Ibid*, Canadian Advisory Council on the Status of Women, p. 1. Barbara Blouin, *op. cit.*, p. 19.

[24] Nova Scotia Department of Community Services, 1990 Annual Report, p. 70. The total number of orders includes 3,660 from Dartmouth and Kentville for which there are no figures available on numbers of violations.

and/or notifying a Family Benefits worker. In any case there will be a delay in payment, which can be a serious difficulty for women who are already living in poverty.[25]

Women who are receiving Family Benefits have the amount of their maintenance orders subtracted from their social assistance cheques. When payments are late, defaulted, or less than the full amount, the province may make up the difference. But the woman is first required to file an affidavit and initiate a "show cause" hearing – often she is told that receiving her social assistance cheque is dependent upon her having done this. This may happen month after month. Many women simply stop reporting defaulted or late payments to their social workers – it is too much trouble (especially if they wish to have no further contact with their ex-partners).[26]

Other women may attempt to arrange a much lower maintenance order than they are entitled to, a nominal maintenance order. If they are going to have to do without, it is much easier to do without a smaller sum. In these cases, women and children survive on less than the provincially-determined entitlement, the province pays a greater portion of the family's income than it should, and the absent father pays little or nothing to support his child.[27]

There have been proposals for change in Nova Scotia's system of maintenance enforcement. And numerous studies have shown that effective enforcement holds cost savings for the state, since the money recovered is substantially more than the costs of enforcement.[28] The Advisory Council urges the Department of Community Services to accelerate the implementation of an effective program for enforcement in Nova Scotia. The process of automating the courts must be speeded up. We further suggest that the Province consider a more thorough revision of the enforcement system, such that maintenance payments are taken directly from source whenever possible.

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[25] Barbara Blouin, *op. cit.*, p. 19-23. Communication with Louise MacPherson, Co-chair, Bryony House Social Action Committee, Subcommittee on Family Maintenance and Child Support Payments, February 1992.

[26] *Ibid.*

[27] *Ibid.*

[28] Federal Department of Justice, An Annotated Bibliography of Maintenance and Custody Literature, Ottawa, 1988, p.78.

RECOMMENDATIONS

The Nova Scotia Advisory Council on the Status of Women recommends:

1) that streamlining administrative resources in primary, secondary and post-secondary education would be cost-effective;

2) that any such consolidation of resources should not be equated with centralization, and should be accompanied by improvements in alternate methods of delivery;

3) that the Province of Nova Scotia accelerate implementation of the recommendations of the Nova Scotia Royal Commission on Health Care;

4) that the Province of Nova Scotia recognize the importance of sex education in (a) the prevention of unintended pregnancy, and (b) the prevention of all sexually transmitted diseases, including AIDS;

5) that the Province of Nova Scotia increase funding to expand family planning programs, sex education, and pre- and post-abortion counselling in this province in an effort to reduce the number of unintended and unwanted pregnancies;

6) that the Province of Nova Scotia recognize the importance of family planning clinic services as the cornerstone of a preventive approach to sexual health, and take immediate steps to increase the number of such clinics in this province to ensure better access for all Nova Scotians;

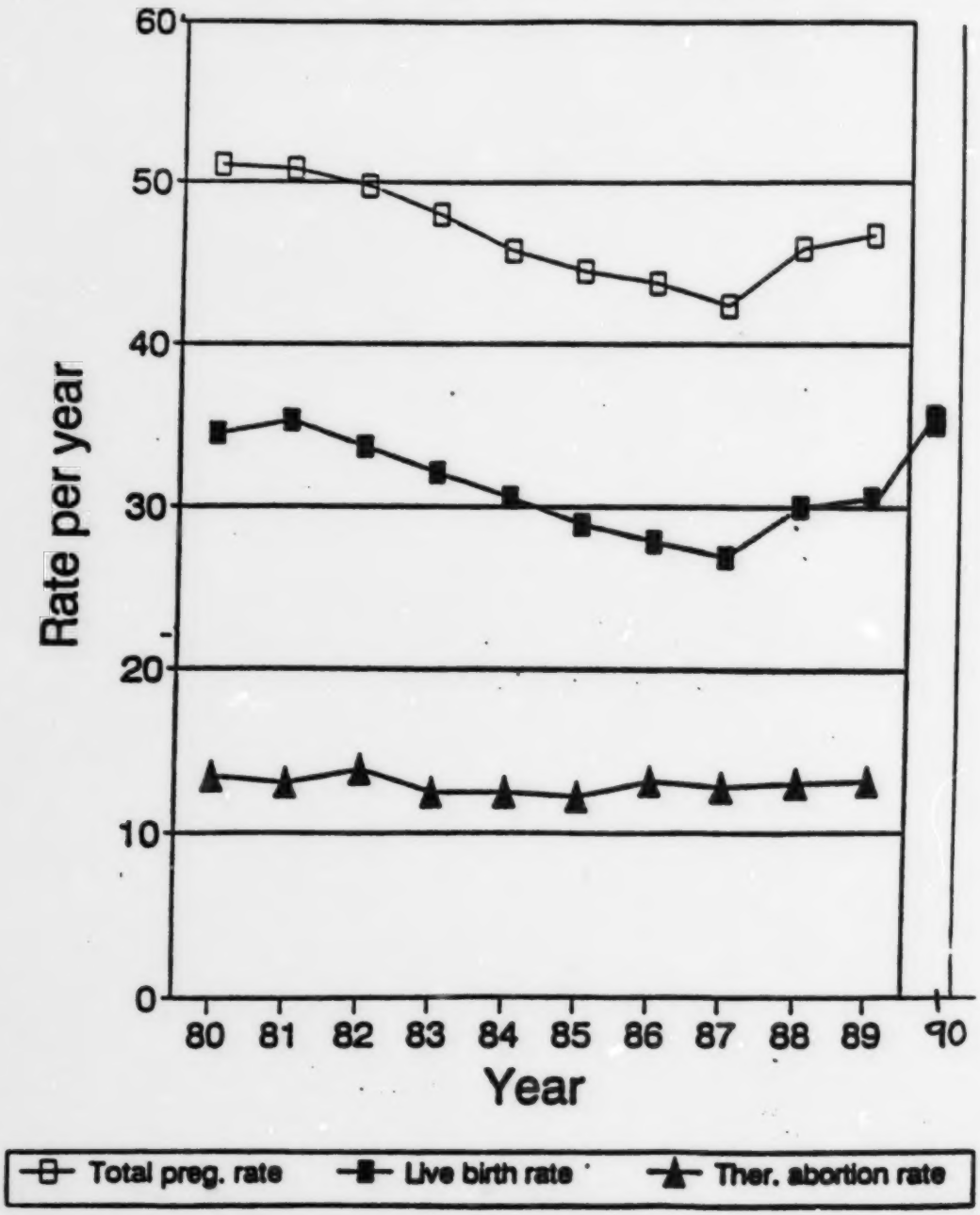
7) that the Department of Community Services accelerate the implementation of the recommendations made by the Round Table on Day Care in Nova Scotia;

8) that the Department of Community Services create more new subsidized child care spaces in Nova Scotia;

9) that the provincial Family Benefits Program be revised to provide real incentives for parents to take on paid employment, full- or part-time; and

10) that the Department of Community Services accelerate the implementation of changes to the maintenance enforcement system to provide greater efficiency, while at the same time considering complete revision of the system such that enforcement payments are taken directly from source whenever possible.

Pregnancies, Births and Abortions
per 1000 women age 15-19 in Nova Scotia



Source: Planned Parenthood Association of Nova Scotia, based on statistics from the Departmentof Health.

APPENDIX A

Family Court Maintenance Enforcement Services by Region

April 1, 1989 - March 31, 1990

Location	Number of Cases where Court Order Issued	Number of Cases where Orders Were Discontinued	Number of Active Orders at Year-End	Number of Court Order Violations	Total Collections
Dartmouth	N.A.	N.A.	1,948	N.A.	$2,533,807.95
Kentville	N.A.	N.A.	1,712	N.A.	1,735,225.53
Halifax	271	N.A.	1,503	560	2,620,731.94
Sydney	386	175	2,197	1,092	3,103,892.44
Port Hawkesbury	46	19	369	163	469,034.12
Lunenburg	45	41	790	265	771,864.91
New Glasgow	229	101	1,253	372	1,867,365.20
Truro	125	132	707	570	965,285.30
Amherst	153	46	757	315	1,004,617.48
Antigonish	72	34	459	114	575,315.18
Yarmouth	292	173	1,117	1,496	1,527,974.04
Totals	1,619	721	12,812	4,947	$17,175,114.09

Source: Report of the Nova Scotia Department of Community Services 1990, Table 10, p.70.

APPENDIX B